



10-20-00

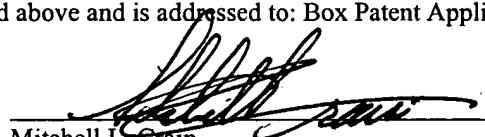
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EM268411340US

PATENT
Mtr #964-4CERTIFICATE OF EXPRESS MAIL SERVICE NO. EM268411340US

Date of deposit: October 19, 2000

I hereby certify that this paper is being deposited with the United States Post Office, Express Mail Service Post Office to Addressee, with sufficient postage, on the date indicated above and is addressed to: Box Patent Application, Assistant Commissioner for Patents, Washington, DC 20231.


Mitchell L. Crain

Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

Docket No.: 964-4

Sir:

Transmitted herewith for filing is the patent application of:

INVENTOR(S): Henry Edward Pfeiffer

FOR: PREFABRICATED FOAM BLOCK CONCRETE FORMS AND TIES MOLDED THEREIN

Enclosed are:

Patent Application with 13 pages of Specification, including 1 page of Claims and 1 page of Abstract
 Combined Declaration and Power of Attorney
 (8) sheets of drawing(s)
 Information Disclosure Statement
 Form PTO-1449 and references cited
 An Assignment of the invention to _____
with Cover Sheet and the recording fee of \$40.00.
 This application is being filed pursuant to 37 CFR 1.53(d), Declaration of Inventor(s) to be filed subsequently.
 Other: Return Receipt Post Card
 A check in the amount of \$355.00 to cover the filing fee is enclosed.

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)
FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	2 - 20 =	* 0
INDEP. CLAIMS	2 - 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT	0	

*If the difference in col. 1 is less than zero, enter "0" in Col. 2

TOTAL

SMALL ENTITY	
RATE	Fee
	\$ 355.00
x \$ 9	
x \$40	
+\$135	
	\$ 355.00

OTHER THAN A SMALL ENTITY	
RATE	Fee
	\$ 710.00
x \$18	
x \$80	
+\$270	
	\$

Please charge my Deposit Account No. 11-0160 in the amount of \$ _____. A duplicate of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 11-0160. A duplicate of this sheet is enclosed.

Any additional filing fees required under 37 CFR 1.16.

Any patent application processing fees under 37 CFR 1.17.

The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 11-0160. A duplicate copy of this sheet is enclosed.

Any patent application processing fees under 37 CFR 1.16.

Any fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date: 10/14/00


Mitchell L. Crain
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Blackwell Sanders Peper Martin LLP
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ATTORNEY(S) FOR APPLICANT(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB109-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$355)

Complete if Known

Application Number	
Filing Date	October 19, 2000
First Named Inventor	Henry Edward Pfeiffer
Examiner Name	
Group/Art Unit	
Attorney Docket No.	964-4

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 11-0160

Deposit Account Name BLACKWELL SANDERS PEPPER MARTIN LLP

Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. Payment Enclosed:

Check Money Other Order

FEE CALCULATION**BASIC FILING FEE**

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	690	201	345	Utility filing fee	\$355
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	690	208	345	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)				(\$355)	

2. EXTRA CLAIM FEES

Total Claims	2	Extra Claims	Fee from below	Fee Paid
Independent Claims	2	-20** = 0	x	=
Multiple Dependent	2	-3*** = 0	x	=

** or number previously paid, if greater. For Reissues, see below

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL 2				(\$355.00)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - last filing fee or oath	
127	50	22	725	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	380	216	190	Extension for reply within second month	
117	870	217	435	Extension for reply within third month	
118	1,360	218	680	Extension for reply within fourth month	
128	1,850	228	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive – unavoidable	
141	1,210	241	605	Petition to revive – unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt.	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	690	246	345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	249	345	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____				SUBTOTAL (3)	(\$)
Other fee (specify) _____				SUBTOTAL (3)	(\$)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY*Complete (if applicable)*

Name (Print/Type)	Mitchell L. Crain	Registration No. (Attorney/Agent)	37,299	Telephone	(816) 983-8944
Signature				Date	

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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